Robert E Harris Jr.

Cardiac Catheterization
Order# 74983959
Studydate:5/20/13

Shared with permission from Dr. Robert Harris Jr.

Name	MRN	Description
Robert E Harris Jr.	EP01126695	68 yr/o male

LEFT HEART CATH W POSSIBLE PCI

Dr. Robert Harris had a heart attack at approximately 45 years of age. He discovered that he had 3-vessel heart disease with blockage of 75 - 95%. He received approximately 200 IV Chelation Treatments over 20 years and reversed his heart disease as proved by this report of his heart catherization 20+ years later!

PROCEDURE: Left heart catheterization with selective coronary angiography, left ventriculogram.
CLINICAL HISTORY: This is a 68-year-old gentleman with a history of Wolff-Parkinson-White syndrome who presents with supraventricular tachycardia and a ventricular response of 200 beats per minute. After medical stabilization the patient ruled in for a small subendocardial ischemic event and over the evening developed nonsustained ventricular tachycardia. He has a previous history of prior cardiac angioplasty in 1992.
The risks, benefits, and details of the procedure were explained to the patient. The patient verbalized understanding and wanted to proceed. Informed written consent was obtained.
PROCEDURE TECHNIQUE: The patient was approached from the right femoral artery using a 6 French short sheath. Left coronary angiography was done using a Judkins L4 guide catheter. Right coronary angiography was done using a Judkins R4 guide catheter. Left ventriculography was done using a pigtail catheter.
CONTRAST: Total of 100 cc.
COMPLICATIONS: None. At the end of the procedure manual pressure was used for hemostasis.
HEMODYNAMICS: Aortic pressure was 133/70; LV pressure was 140/7; LVEDP 15. There was no gradient between the left ventricle and aorta.
ANGIOGRAM/CORONARY ARTERIOGRAM: The left main coronary artery is moderate in size and length. It appears angiographically normal.
The left anterior descending artery is moderate vessel with minimal diffuse luminal irregularities. This vessel gives rise to several smaller diagonal branches each of which exhibit minimal luminal irregularities.
The left circumflex artery is moderate sized vessel giving rise to several marginal branches. This vessel exhibits minimal luminal irregularities throughout its entirety.
The right coronary artery is moderate to large size dominant vessel with minimal luminal irregularities throughout.
LEFT VENTRICULOGRAM: Left ventricular angiogram was done in the 30° RAO projection and revealed normal left ventricular wall motion and systolic function with an estimated ejection fraction of 60%. LVEDP was 15 mmHg. There was no mitral regurgitation noted. There was 10 mm gradient noted on pullback from left ventricle to the aorta.
IMPRESSION OF HEART CATHETERIZATION:

1. Minimal epicardial coronary artery disease as outlined above
2. Normal left ventricular systolic function.
3. Normal left ventricular filling pressures

RECOMMENDATION:
1. Aggressive risk factor modification
2. Maximization of medical management

Jacob L. Nunamaker, MD
5/20/2013
11:04 AM

Dr. Harris went from 95% blocked arteries to "minimal epicardial coronary disease" = Minimal Heart Disease when twenty years ago he had 3-vessel heart disease with blockages of 75 - 95%. Harvard educated Cardiologists Dr. Gervasio Lamas MD (Columbia, Mount Sinai Hospital), and Harvard educated Dr. Elmer Cranton MD (author of Bypass Your Bypass) were correct about the benefits of Chelation Therapy.